



THE DIRECTORATE OF OFFSHORE GAMING

APPLICATION FOR AN INTERACTIVE GAMING OR INTERACTIVE WAGERING LICENCE

Schedule "B":

"BUSINESS ENTITY INFORMATION PACKAGE"

BUSINESS ENTITY INFORMATION

This is **Schedule "B"** to the Regulations concerning Interactive Gaming and Interactive Wagering

All information provided by the Applicant to the Directorate of Offshore Gaming will be held in the strictest confidence and will not be used by the Directorate for any purpose other than matters pertaining to this application unless it is required for the administration or enforcement of the Law or these Regulations or if it is related to an official investigation.

**THIS BUSINESS ENTITY INFORMATION PACKAGE CONTAINS THE
FOLLOWING DOCUMENTS.
PLEASE ENSURE YOUR PACKAGE IS COMPLETE**

1. Instructions for completion.
2. Oath or Solemn Affirmation.
3. Directorate for release of information.
4. Business Entity Information Form.
5. Declaration
6. Attachment page.

INSTRUCTIONS FOR COMPLETION

1. This Business Entity Information Package must be completed by the controlling Business Entity seeking to obtain an interactive gaming or interactive wagering license for its Antigua and Barbuda Corporation.
 2. Type or print in BLOCK LETTERS an answer to every question.
 3. If a question does not apply, state "N/A" in response to that question.
 4. If there is nothing to disclose in reply to a particular question, state "nil" in response to that question.
 5. If there is insufficient space on a printed form in which to answer a question, additional information may be provided on an attachment page, a form for which is attached.
 6. When required to use an attachment page, precede each answer thereon with the title applicable to that question.
 7. All dates should be completed in the form: Day/Month/Year.
 8. This form is to be completed in the English language. Any documents required to be provided are to have a certified English translation appended.
 9. Failure to give true and correct answers to any questions in this form will be grounds for the Directorate to refuse an application or revoke a license that has been granted on the basis of untrue or incorrect information.
 10. The completed form should be forwarded by registered mail or courier to:

The Directorate of Offshore Gaming
The First Caribbean Financial Centre
Old Parham Road
St. John's
Antigua
 11. The Business Entity Information package should be sealed in an envelope and marked "Private and confidential".
 12. Any further enquiries should be directed to the Directorate.
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**OATH OR SOLEMN AFFIRMATION BY THE
APPLICANT
BEFORE AN AUTHORIZED PERSON**

I, _____ OF _____
SWEAR OF SOLEMNLY AFFIRM THAT:

1. I am the _____ of _____
(Relationship of declarant to the applicant) *(Name of applicant)*
2. I have personally completed (or I am personally responsible for providing the information contained in) the Business Entity Information Form to which this Declaration is appended.
3. I certify that the particulars contained in the Business Entity Information Forms are true and correct in every detail and fully disclose the information to complete the Business Entity Information Form.

(Signature of applicant)

() Sworn before me, _____

() Solemnly affirmed before me, _____

at _____ this _____

(Signature) _____

(Given name and name in block letters) _____

(Specify in which capacity this declaration is taken: as commissioner for oaths, justice of the peace, lawyer, notary, mayor, clerk or secretary-treasurer of a municipality, registrar or clerk of a court of competent jurisdiction)

AUTHORITY FOR RELEASE OF INFORMATION

(Name of Business Entity)

of

(Address)

(Hereinafter referred to as the "Business Entity"):

Acknowledges that the Interactive Gaming and Interactive Wagering Regulations authorize the Directorate to cause to be made investigations about the business entity for the purposes of determining the Business Entity's suitability for the purposes of the Laws and by signing this:

1. Authorizes the Directorate and any person conducting any investigations or enquiries on behalf of the Directorate to obtain any information and make any investigations or enquiries which relates to the Business Entity that may be relevant to any of the purposes of the Laws, in any jurisdiction;
2. Authorizes the manager or other principal officer of any branch or office of a bank or financial institution in any jurisdiction to whom a copy of this release is presented to allow any Authorized Person to inspect and obtain copies of, or to release to any Authorized Person, any record, document or other information of any kind in written, electronic or any other form, which relates to the Business Entity and is held by the bank or financial institution;
3. Authorizes any officer of any police service, law enforcement agency or regulatory body in any jurisdiction to whom a copy of this Directorate is presented to release to any Authorized Person any information or official record of any kind in written, electronic or any other form, which relates to the Business Entity and is held by the police service, agency or body, including any information relating to the criminal history of the Business Entity, and
4. Undertakes that it will at all times sufficiently indemnify the Directorate and Authorized Persons and keep them indemnified against all liability in respect of the supply or publication of the information and against all actions, suits, proceedings, claims, demands, costs and expenses whatsoever which may be taken against the Authorized Persons or incurred or become payable by the Authorized Persons in respect thereof.

By signing below, I confirm that my authority is given with the full knowledge and consent of the Business Entity and that I have the necessary permission to provide this authority on behalf of the Business Entity.

Signed at _____

This Day of _____,

(Name of Business Entity)

Per:

(Name of Business Entity Representative)

(Position of Business Entity Representative)

BUSINESS ENTITY INFORMATION FORM

1. Full Registered Name of Business Entity:

2. Legal Nature of Business Entity (*e.g. Corporation, Partnership, Limited Liability Company, etc.*):

3. Laws under which Business Entity was established (*Provide name of jurisdiction and cite relevant legislation*):

Attach copies of constating documents of the Business Entity, e.g. Charter, Letters Patent, Certificate of Incorporation. Also attach certified copies of internal management documents such as: By-laws, Operating Agreements, Partnership Agreements.

4. Date on which Business Entity was established: _____

5. List any other jurisdictions in which Business Entity is registered or seeking interactive gaming or betting registration: _____

6. Has the Business Entity ever applied for and been refused registration in any matter or a license, or a certificate, including a gaming and betting license, in any jurisdiction?

Yes

No

If yes, please give details on an attachment page.

7. Has the Business Entity ever had any license revoked, including a gaming or interactive wagering license? If so, give details.

Yes

No

If yes, please give details on an attachment page.

8. License Certificate or Registration Number(s) or other documentation for jurisdiction(s) in which Business Entity is registered: _____

9. Address of Registered Office: _____

10. Address of principal place of business (*if different from registered address*):

11. Mailing Address (*if different from registered address*):

12. Telephone: _____

13. Fax: _____

14. E-mail: _____

15. URL of Home Page: _____

16. Name of Authorized Representative: _____

Address: _____

Telephone: _____

Fax: _____

E-mail: _____

17. Describe the primary objectives and business activities of the Business Entity:

18. Is the Business Entity a member of the Interactive Gaming Council or any other Internet Gaming or Betting association, or any other gaming associations such as the International Association of Gaming Attorneys?

Yes

No

If yes, how long has the Business Entity been a member? _____

19. On attachment page, provide full details of all parent, holding subsidiary and related business entities (attach flowchart) including details as to the nature of the relationships with the applicant Business Entity, the names of key persons, directors, shareholders, partners and chief executive officers of the related business entities and the business conducted by each related business entity.

20. On attachment page, list those business entities in which the business entities identified in paragraph 16, have a controlling or ownership interest in excess of five (5%) percent. The Directorate in its discretion may require disclosure of all beneficial owners.

LITIGATION

21. Provide full details of any criminal, regulatory or civil actions taken by or against the Business Entity in the past ten (10) years, including name of jurisdiction(s) in which action(s) were brought, court file number(s) and the outcome of each action:

22. Provide full details of any pending criminal, regulatory or civil litigation, by or against Business Entity, including the name of the jurisdiction(s) in which the action(s) are proceeding and court file number(s):

ADDRESSES

23. Commencing with the current address and working backwards, list all addresses at which the Business Entity has been registered or has conducted business over the last ten (10) years.

PERSONNEL

24. On an attachment page, list the names, addresses (including the dates at each address) and places of birth for each key person, director, shareholder with more than five (5%) percent voting or ownership interest in the Business Entity, partner and chief executive officer of the Business Entity *as of the date on which this form is completed* and describe the nature of each person's interest and role in the Business Entity.
25. On an attachment page, list the names, addresses (including the dates at each address) and places of birth for each key person, director, shareholder with more than five (5%) percent voting or ownership interest in the Business Entity, partner and chief executive officer who have ceased to hold an interest in the Business Entity during the last five (5) years.
26. On an attachment page, list the names, addresses and telephone numbers of the Business Entity's auditors, both presently and over the last five (5) years.
27. On an attachment page, list the names, addresses and telephone numbers of any legal advisors, solicitors or other consultants engaged by the Business Entity over the last five (5) years.

CONFIDENTIAL FINANCIAL DETAILS

28. Attach certified copies of the audited and, if applicable, published financial statements of the Business Entity for the last five (5) years.
29. Attach certified copies of the audited and, if applicable, published financial statements of any parent or holding business entity for the last five (5) years.
30. Attach certified copies of the annual return or equivalent annual filing for all jurisdictions in which the Business Entity is registered, for the last five (5) years.
31. Furnish full details of any persons, companies or institutions from which the Business Entity has current loans or has obtained funds on loan during the last five (5) years.
32. Advise if there has been any substantial change to the financial situation of the Business Entity since the last audited accounts. If so, provide full details.

33. Supply details (name, branch and account number) of all bank accounts held or operated by the Business Entity.

34. Supply details of all investments of the Business Entity.

35. Confirm that if requested:

- i. The Business Entity will produce certified copies of its income tax returns;
- ii. The Business Entity will produce copies of minutes of shareholder and directors meetings;
- iii. The Business Entity will produce any information relevant to the published financial statements;
- iv. The Business Entity will authorize the release of any other information required by the Directorate.
- v. The Business Entity will provide full details of any other directorships, partnerships or other business interests or affiliations with which the key person, directors, partners
- vi. and chief executive officers of the Business Entity or shareholders with more than five (5%) voting or ownership interest in the Business Entity are currently or previously associated.

36. If investment in the Interactive Gaming or Interactive Wagering License will be used as collateral against any indebtedness, please provide details on an attachment page.

37. Prior to this date has the Business Entity or any key person, director, partner or chief executive officer of the Business Entity, or shareholder with more than five (5%) percent voting or ownership interest in the Business Entity been associated with the ownership, administration or management of:

- | | | |
|--|------------------------------|-----------------------------|
| (i) A casino; | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (ii) Keno or lottery operations; | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (iii) Interactive gaming or interactive betting; | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (iv) Race wagering or wagering operations; | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (v) The manufacture, assembling, selling, distributing, importing, supplying or repairing of gaming or gaming related machines, on-line machines | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

If you have answered yes to any of the foregoing, please give details on an attachment page.

38. Does the Business Entity have any interest, financial or otherwise, in any other business entity or with any person, or has the Business Entity ever provided any financial assistance or other support to any other business entity or person involved with the ownership, administration or management of:

- | | | | |
|-------|---|------------------------------|-----------------------------|
| (i) | A casino; | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (ii) | Keno or lottery operations; | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (iii) | Interactive gaming or interactive betting; | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (iv) | Race wagering or wagering operations; | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (v) | The manufacture, assembling, selling, distributing, importing, supplying or repairing of gaming or gaming related machines, on-line machines? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

If you have answered yes to any of the foregoing, please give details on an attachment page.

Has the Business Entity ever changed its name?

Yes No

If yes, please give details on an attachment page

40. Does the Business Entity have, or does it use, or has it previously used, any other business name?

Yes No

If yes, please give details on an attachment page.

41. Will the business entity agree to promote on its web site, a hotlink for utilization by problem or addicted gamblers?

Yes No

If the Business Entity has a programme or system in place to deter and/or limit problem or pathological gambling, please describe it on an attachment page.

42. Will the Business Entity agree to prohibit any pornography on its Internet gaming or betting site?

Yes No

43. Will the Business Entity agree to whenever applicable, file a suspicious activity report (**SAR**) in the format illustrated below?

(a) Date

(b) Dollar amount

(c) Type of suspicious activity

- Counterfeit/Fraudulent Check
- Counterfeit/Fraudulent credit/debit card
- Large transactions with minimal gambling
- Gambling on both sides of an even bet
- Money laundering
- No apparent business or lawful purpose
- Use of different monetary instruments
- Use of multiple credit or deposit accounts
- Unusual use of wire transfers
- Other suspicious or illegal activity (specify)

44. Will the Business Entity agree to take affirmative and effective steps to prohibit underage gaming?

Yes No

If the Business Entity has a programme or system in place to deter and/or limit minors from gambling, please describe it on an attachment page.

45. Has the Business Entity assessed whether all its key persons have obtained a "key person license" Required by the Regulations?

Yes No

46. Do you have, or intend to have, any suppliers or vendors who receive a percentage of the winnings, turnover or games play of either an interactive gaming or an interactive wagering activity?

Yes No

If yes, please list the names, address and telephone number of the suppliers, and identify a contact person for the supplier on an attachment page. In addition, include in your list whether the supplier has completed a Schedule "B" and "C".

47. Does the Business Entity meet the "Reserve Requirement" of at least One Hundred Thousand United States Dollars (**\$100,000.00 US**)?

Yes No

48. Does the Business Entity have a programme or system to confirm identity, residence and the age of potential customers?

Yes No

If yes, please briefly describe the programme or system, including a description of the use of any Third party services to assist the Business Entity in the verifying the identity, residence, and age of potential customers.

ATTACHMENT PAGE – SECTION B

Question Number:

Signature: _____

DECLARATION

By signing below, I declare that:

1. The information contained in this application is complete and accurate;
2. In the case of a corporation, partnership or other business entity, that I am duly authorized to make the application on behalf of the corporation, partnership or other business entity named as applicant;
3. I have been provided with a copy of the Interactive Gaming and Interactive Wagering Regulations. The applicant agrees to abide by the provisions of the Regulations which will be the law governing the applicant's relationship with the Directorate of Offshore Gaming of Antigua and Barbuda.

Signature: _____

Name: _____
(Please Print)

Date: _____

End of Schedule "B". Please go on to Schedule "C".